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Social and Economics Aspects of The Pandemic Influence in Ukraine

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Abstract

The pandemic has exacerbated a wide range of medical, economic, and social factors that have affected people's lives and health. A systematic approach to the study of these factors in Ukraine involves statistical and expert analysis in the field of health and socio-economic consequences of the pandemic. The article analyzes the state and problems of public health in Ukraine. An assessment of the state of medical services and a self-assessment of the state of health of the population are given. Based on a statistical analysis of the data, it is shown that measures to combat COVID-19 have led to increased inequality, increased poverty, loss of jobs in large numbers, widening the gap between rich and poor, between urban and rural residents, between metropolitan and small towns. Analyzed data from opinion polls in Ukraine indicate the attitude of the population to measures to overcome the effects of the pandemic. Analysis of the socio-economic aspects of the pandemic is the basis for decision-making to overcome its consequences.

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1. Introduction

COVID-19 has an unprecedented impact on the community around the world. It is enough to read the latest news to make sure that there is a wide range of medical, economic and social factors that are directly or indirectly caused

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by the virus or exacerbated by a pandemic. Tens of millions of people have been infected with the virus. More than a million people have died or been affected by the long-term health effects of the virus. Many millions of people lost their jobs, and others faced the closure of their businesses as entire manufacturing sectors were forced to shut down. Property and social inequality has increased.

During the spread of the pandemic, many foreign and domestic experts, expert organizations and think tanks are trying to make predictions using a scenario approach. Surveys of various groups of the population are conducted in order to determine the reaction of society to the challenges of the current situation, coercive measures and restrictions, as well as to identify collective expert opinion.

A systemic anti-pandemic and anti-crisis approach should focus on three priority tasks: first, it is large-scale health interventions, including the accelerated development of vaccines and diagnostic and treatment tools for all people around the world; second, it is an effort to overcome the catastrophic socio-economic and humanitarian consequences of the pandemic and its consequences for human rights; third, it is measures to restore and protect the population from complete impoverishment and provide access to the most important global public goods.

2. The state and problems of the Ukraine's population health providing

Article 49 of the Constitution of Ukraine guarantees the right to receive free medical care in state and municipal medical institutions, but in reality a significant share of care is paid by citizens. Without providing economic guarantees for the realization of the right to medical care, access to medicines, the state has not created mechanisms for the realization of this right. There are also no national health insurance programs. The state has not formed the institutional and organizational-economic basis of the right to free medical care, and hence the right to life of citizens. The social consequence is a high level of mortality and morbidity, which reduces the quantitative and qualitative indicators of human capital, poses a threat to economic security in terms of "demographic security". Thus, the structure of the subsistence minimum does not reflect the real model of consumption, which ensures the constitutional right to life and procreation. In accordance with current legislation and regulations, the Cabinet of Ministers of Ukraine is obliged to revise the method of calculating the subsistence level at least once every five years, but the revision of this method in recent years has been formal, there has been no mandatory public examination of this social standard. . Despite the fact that the court ordered to revise this standard, the Cabinet of Ministers of Ukraine declares that there is no financial support for such revision, and also announces that the criterion of the revised standard considers the government's ability to provide payments rather than real needs [1,2]. This not only limits the standard of the right to life and development, but also reduces the potential of the national economy, as other social payments (minimum wage, tariff grid) tied to this standard lead to a decrease in the purchasing power of the population.

The number of state and municipal pharmacies, health care facilities decreased sharply in 2017-2020, especially in rural areas, which leads to real discrimination of rural residents in terms of physical access to health care. The decentralization reform provides for the transfer of health care facilities to the balance of local communities, most of which are subsidized and unable to maintain these facilities, as a result of which they are closed, depriving citizens of access to health care. The government, declaring the need to maintain a viable health care network, determines the amount of funding as a criterion of capacity, rather than the needs and opportunities to protect the interests of the population [3]. Moreover, such a reduction is taking place without proper socio-economic justifications, as hospital districts have not yet been formed in Ukraine, and at the state level there is no specific vision of how, to what extent the right to life and development will be ensured through the health care system. In addition, the problem of shortage of medicines and medical devices in some market segments is exacerbated. In general, the public health system is characterized by a low level of state supply of medicines, especially domestically produced. If in developed European countries the share of state support is 60-80%, in Ukraine - only 15-20% of the total need. The lack of self-treatment of illnesses should be offset in the first place by the cost of staying in health care facilities, but this obligation is also not being met. Even in a pandemic, the cost of purchasing drugs is made through the pharmacy network (more than 80% of pharmaceutical sales), with individuals - about 99.7% of purchases (calculated with [4]).

According to official data, [5] 43.3% of health care is provided by the population, including 40.5% of households. We can say that the system of ensuring the availability of medical care is insufficient. In 2016, 22.6%, in 2017 - 16.7% of the total number of households according to the results of self-assessment of the availability of

health care could not receive medical care, purchase medicines and medical supplies mainly due to their high cost [6]. According to O. Petrenko's research, more than half of the respondents claimed the deterioration of medical care and identified it as one of the five biggest threats to the state [7].

It is necessary to state the deterioration of the availability of medical care, in particular medicines, due to the spatial disparities in the location of the pharmacy network. Availability of pharmaceutical products depends on the type and size of the settlement. Although the retail segment of the Ukrainian pharmaceutical market occupies more than 80% of the total capacity of the pharmaceutical market, over the past three years the number of pharmacies has increased only in large cities, rural settlements and urban settlements decreased due to the elimination of pharmacy kiosks in 2010-2020. decreased by 10 thousand units.

3. Statistical analysis of the socio-economic consequences of the pandemic

The COVID-19 pandemic has dealt a severe blow to public health and the economy. The government has responded with policy measures to limit the spread of the disease and mitigate the associated economic consequences. First of all, this is due to strict quarantine measures that have been introduced: the closure of shopping and entertainment centers, a ban on all public events, restrictions on movement both within the country and when crossing its borders, reducing production (due to limits) simultaneous stay of employees in one room), etc. Some companies have transferred their employees to the mode of work "at home", while others are forced to send their employees on vacation "[5, p. 22]. Measures to combat COVID-19 have led to increased inequality, increased poverty, and the loss of many jobs. These phenomena can lead to social and political destabilization in a country where living standards are low and government support for the population is limited.

In our opinion, COVID-19 exposes and exacerbates socio-economic inequality. Depending on the level of income, living conditions, profession, people will experience the economic shock that accompanies the pandemic, which will increase the polarization in society. The difference is already noticeable now, when almost half of the world's population is in self-isolation. This is the quarantine of office workers. The possibility of remote work during quarantine is strongly correlated with the level of income and decreases as it decreases (see Table 1).

The inequality associated with the ability to work remotely is pronounced geographically, depending on the specialization of local labor markets, according to the Center for Cities think tank. Thus, in the UK, in large cities in the south-east, where areas such as finance and consulting are concentrated (London, Cambridge, Oxford), about 40% of workers can perform their duties from home, while in cities in the industrial north - less than 20%. According to the British think tank Resolution Foundation, only 10% of people with the lowest salaries will be able to switch to online works [8]. Those who are unable to work from home during quarantine have problems maintaining economic activity and income or health. Low-wage workers do not have the ability to form any significant financial cushion that could help them survive weeks of quarantine. Some health care workers, as well as workers in key industries and services - nurses, pharmacists, supermarket workers - are not quarantined, continue to work and receive a salary, but they are more likely to be infected because they cannot work. from home. For service workers, which is almost half (49%) of all employed in the world, the fear of the virus is as real as the fear of losing a job, says the World Economic Forum [9].

Table 1. The minimum salary in Ukraine from 2017 to 2021, UAH, (Source [10]).

Period	Month salary, UAH	Growth rate, UAH	Relative growth rate,%
From 01.12.2021 (according Ukrainian legislation)	6500	500	8.3%
From 01.01.2021 till 30.11.2021	6000	1000	20.0%
From 01.09.2020 till 31.12.2020	5000	277	5.9%
From 01.01.2020 till 31.08.2020	4723	550	13.2%
From 01.01.2019 till 31.12.2019	4173	450	12.1%
From 01.01.2018 till 31.12.2018	3723	523	16.3%
From 01.01.2017 till 31.12.2017	3200	1600	100.0%

In areas where income, education, and housing quality are worse, workers are more likely to be employed in part-time jobs and are less likely to work remotely. As a result, the cost of shock for them will be higher in terms of both economic status and health. In addition, low incomes and lower quality of environment are associated with more frequent mental disorders, depression and increased levels of domestic violence. Given the high financial and psychological stress caused by the COVID-19 pandemic and prolonged quarantine, this aspect of inequality may also increase [11].

The number of working poor will increase significantly, as declining economic activity will hit workers close to the poverty line particularly hard: the ILO estimates that up to 35 million people may fall into this category, while the forecast is for an outbreak. COVID-19 assumed that their number in 2021.

4. Sociological survey data on the COVID-19

According to the Institute of Sociology of the National Academy of Sciences of Ukraine, obtained as a result of the project "Social consequences of the COVID-19 pandemic in the context of social transformation in Ukraine: sociological approach" with grant support from the National Research Foundation of Ukraine for research and development in 2020 [12].

- 59% of respondents often follow the news about the coronavirus, 21% do it sometimes, 11% - rarely, 8% are not interested in such news at all. Older people and women are more likely to follow the coronavirus news.
- 45% of respondents consider the measures taken by the authorities to control coronavirus to be optimal. 30% consider them too soft, 11% - on the contrary too hard. In two weeks, the number of those who consider the government's actions too lenient has increased.
- At the same time, support for the introduction of "hard quarantine" (lockdown) increased from 36 to 42%. (the number of opponents decreased from 61 to 55%).
- Similarly, the number of respondents (from 55 to 58%) who believe that the spread of coronavirus due to lockdown will decrease has increased. At the same time, 58% support the introduction of lockdown on New Year's holidays (40% - against it).

According to a survey conducted by the Kyiv International Institute of Sociology (KIIS) [13] on the assessment of government success and public response to the epidemic, the following data were obtained:

- 46% of respondents believe that the government is successful in combating the coronavirus epidemic, 43% - believe that it is unsuccessful.
- Only 12% of Ukrainians think that the government has successfully managed to provide hospitals with a sufficient number of coronavirus tests, 65% believe that the government has failed to do so.
- 12% of respondents said that the authorities had successfully managed to provide Ukrainian physicians with personal protective equipment; 70% of survey participants believe that the authorities have not coped with this task.
- 14% of respondents say that the government has successfully managed to provide the population with personal protective equipment; 80% are of the opinion that the authorities have not coped with this [14].
- 14% of Ukrainians think that the government is successful in preventing possible economic difficulties in Ukraine related to the coronavirus epidemic, 66% of respondents think that the government is unsuccessful [15].

In interviews about the origin of the virus, respondents were asked to choose which of the three statements about the origin of the coronavirus and its spread in the world they agree with the most. The allegations cover the following views: (1) the natural origin and subsequent spread in the world; (2) artificial development in the laboratory, but random distribution in the world; (3) special development and deliberate dissemination in the world to reduce the population and/or cause harm to individual countries. In addition, respondents could name their option. The results of the survey are presented in Fig. 1. 51.5% of respondents answered that they do not intend to be vaccinated against coronavirus, 12% intend to do so in the near future (or have already done so), 16% intend to do so, but later, 10% intend to do so only when it will be required by formal requirements (for example, for a trip abroad), 10% have not yet been determined. The older the respondents, the more often they express a lack of desire to get vaccinated (their share increases from 43.5% among those aged 18 to 29, to 57% among those aged 60 and over). Among those who do not give up their intention to get vaccinated against COVID-19, 52% are ready to do it only if it is free, 22.5% are willing to pay for it, and another 5% are willing to pay for it to be vaccinated out of turn

(21% undecided). The older the respondents, the more often they answer that they are ready to be vaccinated only free of charge (the share of such people increases from 42% among those aged 18 to 29 to 64% among those aged 60 and over).

Respondents who do not intend to be vaccinated are often motivated by the fact that, in their opinion, vaccines used in Ukraine are not effective or safe, but they are ready to be vaccinated with “some other” vaccine (this answer is given by 45% of those who do not intend to get vaccinated). 27% of them motivate their refusal by the fact that in their opinion, the risks of vaccination outweigh the risks of the disease itself, 10% - by those who have already contracted the coronavirus, 7% have medical contraindications, 3% believe that the likelihood of that they get COVID-19 is very low. Justification for refusing vaccination due to insufficient efficacy or safety of vaccines used in Ukraine is the most common among the youngest age group (18–29 years) (this is motivated by the refusal of 54% of those who do not intend to be vaccinated against COVID-19).

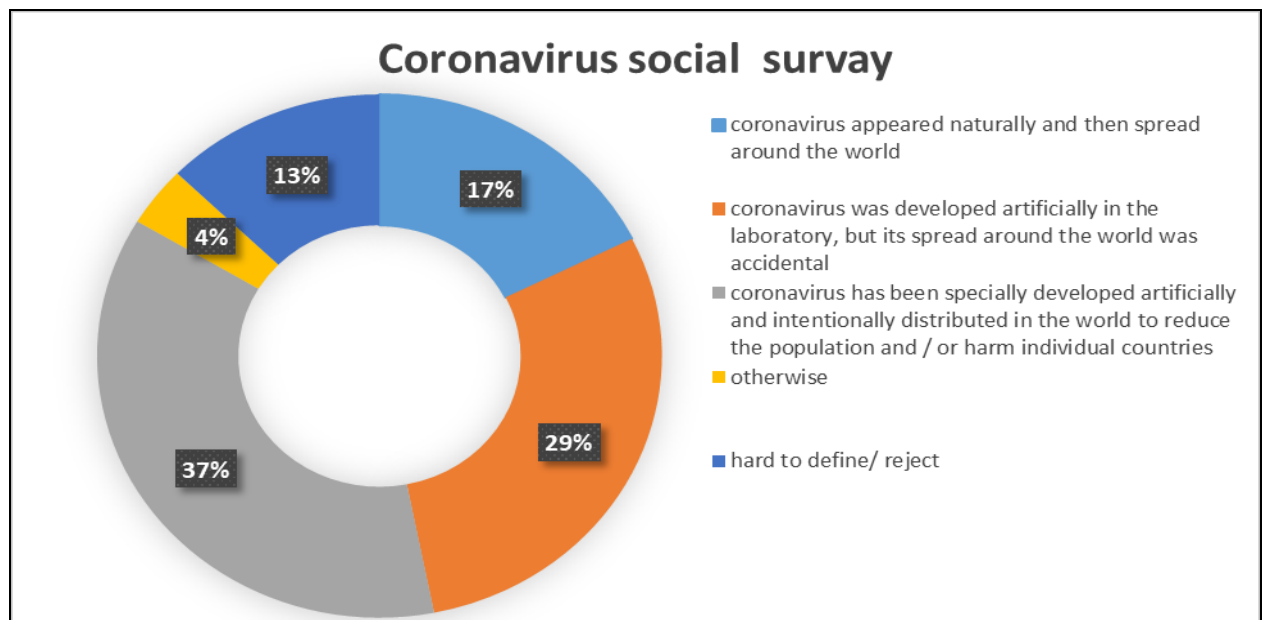


Fig. 1. The study on the attitude of Ukraine citizens to virus COVID-19 appearance, percent (Source [16])

Thus, the above data from opinion polls indirectly confirm our objective data on major problems in the functioning of the health care system and access to quality treatment and medicines in Ukraine. The scientific community is actively involved in the fight against the pandemic. The hierarchical classifier for COVID-19 is presented in [17]. A prognosis for a number of new cases and death cases for COVID-19 is shown in [18]. It is important to investigate the relationship between COVID-19 infection and individual personality [19]. All scientific investigation can help the world community in the struggle against the pandemic [20, 21].

5. Conclusion

So, we can conclude that the state of the health care system in Ukraine was at a low level before the pandemic. And the development of the global crisis caused by the spread of COVID-19 has exacerbated the existing problems.

For successful struggle against consequences of pandemic government should accelerate efforts and money for support public health, diagnostic and treatment tools for all segments of the population. The pandemic has big influence not only in economics of Ukraine but also in such unexpected areas as education and human rights. The government should pay a bigger attention for it's social politics in these areas. The government politics should provide equal access to health care and medicines for all people. Efforts must be made to overcome the causes. It can also be noted that the world has changed a lot during the pandemic. And the changes are happening very fast.

Enhancing digitalization and going to the virtual mode are the best chance to have some positive influence from the pandemic. The government should study to react rapidly for all modern challenges.

The analysis of socio-economic factors of the pandemic consequences shows the need to re-evaluate values, abandon excessive consumption, conduct anti-crisis measures, stimulate economic growth, establish cooperation in relations between the state and business, in international politics.

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